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002543 7590 08/16/2004

ALIX YALE & RISTAS LLP
 750 MAIN STREET
 SUITE 1400
 HARTFORD, CT 06103

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Guy D. Yale	(Depositor's name)
	(Signature)
November 10, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/069,081	08/12/2002	David Foster	DHN/322/PCT/US	9278

TITLE OF INVENTION: ORTHOPAEDIC BONE CEMENT MIXING CONTAINER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	XXXX \$685	\$0	XXXX \$685	11/16/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
BUI, LUAN KIM	3728	206-219000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1. Alix, Yale & Ristas, LLP

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

Summit Medical Limited

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Gloucestershire, Great Britain

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature) _____ (Date) _____

Guy D. Yale November 10, 2004

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